DEDI AVAILAULE CCI

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

| CLAIMS AS FILED - PART I (Column 1) (C | | | | | | mn 2) | | SMALL ENTITY TYPE | | | OTHER THAN | |
|--|--|---|--------------|-------------------------------|----------------------|------------------|-----|---------------------|------------------------|-------|---------------------|------------------------|
| TOTAL CLAIMS | | | 43 | | | | | RATE | FEE |] | RATE | FEE |
| FO | R | | NUMBER FILED | | NUMB | ER EXTRA | | BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| то | TAL CHARGEA | BLE CLAIMS | 43 minus 20= | | • 2 | -3 | | X\$ 9= | | OR | X\$18= | 414.00 |
| INC | EPENDENT CL | AIMS | 8 minus 3 = | | کہ ' | | | X42= | | OR | X84= | 426.00 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | +140= | | OR | +280= | |
| * If the difference in column 1 is less than zero, enter | | | | | r "0". in c | olumn 2 | i | TOTAL | | OR | TOTAL | 1544-00 |
| CLAIMS AS AMENDED - PART II | | | | | | | • | | | OTHER | | |
| (Column 1) | | | | (Colui | | (Column 3) | | SMALL | ENTITY | OR | SMALL | ENTITY |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | . 43 | Minus | ** 7 | 3 | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * 8 INTATION OF MI | Minus | *** d | C AIN | | | X42= | | OR | X84= | |
| | rinoi Priese | INTATION OF MI | JETIPLE DEI | ENDEN | CLAIN | | | +140= | | OR | +280= | · |
| | | | | | | | | TOTAL | | OR | TOTAL ADDIT, FEE | • |
| | | (Column 1) | | (Colu | mn 2) | (Column 3) | • | ADDIT. FEE | | | ADDII. PEEI | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVI PAID | IEST BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | · 36 | Minus | *** | 3 | • / | 11 | X\$ 9= | | OR | X\$18= | |
| | Independent | * 6 | Minus | *** 8 | CLAIM | <i>></i> | | X42= | | OR | X84= | |
| <u> </u> | FINST PRESE | MIATION OF MI | DETIPLE DE | ENDEN | CLAIM | | ¹ [| +140= | | OR | +280= | |
| | | | | • | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT FEE | |
| | | (Column 1) | | · (Colu | mn 2) | (Column 3) | _ ` | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | <u> </u> | | X42= | | OR | X84= | |
| L | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | J | +140= | | OR | +280= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |